



Linda McCulloch, Superintendent
Office of Public Instruction
PO Box 202501
Helena, MT 59620-2501

**School District Claim for
State Reimbursement for
Individual and Isolated Transportation**

State ☐
District ☐
County ☐

**DUE
DATES:**

First Semester
February 1 to County Superintendent
February 15 to State Superintendent

Second Semester
May 10 to County Superintendent
May 24 to State Superintendent

COMPLETE THIS CLAIM FOR STATE REIMBURSEMENT FOR INDIVIDUAL AND ISOLATED TRANSPORTATION:

This claim is for the period beginning _____, 20____ and ending _____, 20____.
month day month day

CERTIFICATION:

The information on this form is complete and accurate to the best of my knowledge.

Date			Signature, Chair, Board of Trustees		
County: 50 Teton			District: 0883 Choteau Elem		District Level: Elementary
District #	Contract #	Shared	Family's Name	Daily Rate	# of Days Transported
1	1839	No	Barker, Ernie & Kim	11.00	_____
1	1840	No	Burdick, Rob	3.00	_____
1	1841	No	Crary, Dusty & Danelle	2.50	_____
1	1843	No	Dellwo, Joe	5.00	_____
1	1844	No	Depner, Ross	0.50	_____
1	1845	No	Depner, Ross & Lorran	2.75	_____
1	1846	No	Hanson, Margaret	1.25	_____
1	1850	No	Rasmussen, Flint & Kathleen	2.50	_____
1	1852	No	Salmond, Mary	1.95	_____
1	1853	No	Salmond, Mark & Mary	5.50	_____
1	1855	Yes	Stott, Marilee	0.13	_____
1	1856	No	Stott, Dan & Marilee	3.05	_____



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Date			Signature, Chair, Board of Trustees		
County: 50 Teton			District: 0884 Choteau H S		District Level: High School
District #	Contract #	Shared	Family's Name	Daily Rate	# of Days Transported
1	1842	No	Dellwo, Duke	8.00	_____
1	1847	No	Hodgskiss, Brad & Jonel	5.25	_____
1	1848	No	Morris, Merle D	5.00	_____
1	1849	No	Moultray, Pam	0.25	_____
1	1851	No	Reiding, Theresa	1.15	_____
1	1854	No	Shephard, Roslyn	2.00	_____
1	1855	Yes	Stott, Marilee	0.12	_____
1	1857	No	Wallace, Keith & Bonnie	6.00	_____



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Date			Signature, Chair, Board of Trustees			
County: 50 Teton			District: 0890 Fairfield Elem		District Level: Elementary	
District #	Contract #	Shared	Family's Name		Daily Rate	# of Days Transported
21	1832	No	Maddox, Tamera L		2.75	_____
21	1833	No	Townsend, Tammy		3.50	_____



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Date			Signature, Chair, Board of Trustees		
County: 50 Teton			District: 0893 Dutton K-12 Schools		District Level: High School
District #	Contract #	Shared	Family's Name	Daily Rate	# of Days Transported
28	2201	No	Story, Gary & Victoria	1.50	_____
28	2202	No	Hagen, Mike & Marilyn	4.50	_____
28	2203	No	Blanchet, John	2.50	_____



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County: 50 Teton			District: 0894 Power Elem		District Level: Elementary
District #	Contract #	Shared	Family's Name	Daily Rate	# of Days Transported
30	1834	No	Andrews, Sue & Clint	3.00	_____
30	1835	No	Magnuson, Mariann	0.75	_____
30	1836	No	Murray, Stacey	0.50	_____
30	1837	No	Sand, Heather	1.25	_____
30	1838	No	Willekes, Hendrika	3.25	_____



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District #	Contract #	Shared	Family's Name		Daily Rate	# of Days Transported
61	2264	No	Field, Patrick		1.50	